



Economic and Social Council

Distr.: Limited
12 November 2001

Original: English

For action

United Nations Children's Fund

Executive Board

Second regular session 2001

10-14 December 2001

Item 5 of the provisional agenda*

Country programme recommendation**

Lesotho

Addendum

Summary

The present addendum to the country note submitted to the Executive Board at its first regular session of 2001 contains the final country programme recommendation for Board approval.

It contains a recommendation for funding the country programme of Lesotho which has an annual planning level of \$1,000,000 or less. The Executive Director *recommends* that the Executive Board approve the amount of \$5,579,000 from regular resources, subject to the availability of funds, and \$13,500,000 in other resources, subject to the availability of specific-purpose contributions, for the period 2002 to 2007.

* E/ICEF/2001/12.

** The original country note provided only indicative figures for estimated programme cooperation. The figures provided in the present addendum are final and take into account unspent balances of programme cooperation at the end of 2000. They will be contained in the summary of recommendations for regular resources and other resources programmes for 2001 (E/ICEF/2001/P/L.73).



*Basic data**
(1999 unless otherwise stated)

Child population (millions, under 18 years)	0.9
U5MR (per 1,000 live births) (2000)	133
IMR (per 1,000 live births) (2000)	92
Underweight (% moderate and severe) (1996)	16
Maternal mortality ratio (per 100,000 live births)	..
Literacy (% male/female) (2000)	74/94
Primary school enrolment (% net, male/female) (2000)	62/68
Primary school children reaching grade 5 (%) (1996)	68
Use of improved drinking water sources (%) (2000)	78
Routine EPI vaccines financed by Government (%)	40
GNP per capita (US\$)	550
One-year-olds fully immunized against:	
Tuberculosis	95 per cent
Diphtheria/pertussis/tetanus	88 per cent
Measles	77 per cent
Poliomyelitis	82 per cent
Pregnant women immunized against tetanus	17 per cent

* Excerpted from the publication "Progress since the World Summit for Children: A statistical review", prepared as a supplement to the Secretary-General's report "We the children: End-decade review of the follow-up to the World Summit for Children" (A/S-27/3), and therefore may differ from data contained in the text of this document.

The situation of children and women

1. The analysis of the situation of children and women remains essentially as described in the country note submitted to the Executive Board at its first regular session in January 2001 (E/ICEF/2001/P/L.3). However, additional observations, concerns and recommendations have emerged during the preparation of the country programme documentation since submission of the country note.

2. The recently approved National AIDS Strategic Plan reveals that Lesotho has the second highest national HIV prevalence rate in southern Africa, with an estimated 26 per cent of adults carrying the virus. Lesotho is one of the 50 poorest countries in the world, ranking 127 out of 144 in the Human Development Index. Gross national disposable income has dropped from an annual growth of 3 per cent between 1994-1997 to 2.6 per cent in 1998. Related to this trend is the skewed distribution of income, whereby 10 per cent of households receive 44 per cent of gross national income, while the bottom 40 per cent receive only 8 per cent. Over 40 per cent of young people under the age of 24 years are unemployed; 250,000 young people enter the workforce each year.

3. Lesotho is at risk of drought and snow emergencies. Erratic rainfall and heavy snowfall are partially responsible for the poor agricultural performance. This has resulted in persistent household food insecurity and child malnutrition.

4. The Concluding Observations and recommendations of the Committee on the Rights of the Child on the Initial Report from Lesotho are reflected in the country programme objectives. They include assistance from UNICEF to strengthen institutional capacities and administrative procedures, reduce gender disparities, and address the needs of adolescents and children in need of special protection measures.

Programme cooperation, 1997-2001

5. The 1997-2001 country programme of cooperation (E/ICEF/1996/P/L.2/Add.1) introduced a rights-based approach to implementing the 1990 National Programme of Action. At the mid-term review (MTR), it was agreed that the original programme objectives were still valid and that the remainder of the country programme should focus on the unfinished business of the World Summit for Children. It was also agreed that each programme component would incorporate a response for the prevention and mitigation of HIV/AIDS and for the protection of children from abuse, neglect, exploitation and violence.

6. During this period, the United Nations Country Team finalized the Common Country Assessment (CCA), which included children and youth as one of five areas for coordinated action. Among the issues which the United Nations Country Team will address are monitoring the Convention on the Rights of the Child, strengthening child protection measures, care and support for children orphaned by AIDS, monitoring child abuse and neglect, and providing basic primary education to herdboys.

7. In health and nutrition, with support from the Canadian International Development Agency (CIDA) and the United States Committee for UNICEF, UNICEF has been able to advocate for national legislation and monitoring systems for the control of iodine deficiency disorders (IDD). Although overall immunization coverage and maternal mortality ratio have not improved, immunization coverage improved in some parts of the country with assistance from the Government of Japan, Rotary and the United States Centers for Disease Control and Prevention.

8. Policy reforms in non-formal education, early childhood development (ECD) and free primary education were key results during the current programme, with funding support from the Government of Germany, CIDA and the Organization of Petroleum Exporting Countries. In 2000, the free primary education programme was launched, and UNICEF is actively involved in the sector reforms led by the World Bank and supported by a growing number of international partners.

9. In community capacity development, the community organization, participation and empowerment programme provided direct support to rural communities to identify their needs, and develop and implement strategies to meet them. A major outcome was the successful construction of latrines, community halls, bus stops, markets and abattoirs. Ireland Aid and the Government of the Netherlands were the partners in this initiative.

10. Under advocacy and social mobilization, the National Plan of Action goals were incorporated into the Sixth National Development Plan (1997). Social mobilization and partnerships with Save the Children (United Kingdom) and Radda Barnen has led to UNICEF contributing to the ongoing Law Reform Commission Working Group on children's rights. Networks of parliamentarians, activists and

ordinary citizens have been established to increase general public knowledge on issues such as child abuse, support for people living with AIDS and child rights.

11. Under knowledge base and information management, research on critical issues related to child labour, children orphaned by HIV/AIDS, child-care practices, herdboys and adolescent health have been conducted with support from Government of Norway. However, information management and the system of data collection need to be further upgraded and decentralized. Data are not always disaggregated by age, gender or location, leading to significant gaps in information vital for planning.

Lessons learned from past cooperation

12. Inadequacy of resources compelled activities to be consolidated at the end of the first year, leaving unmet commitments in water, sanitation and household food security programmes. The Government of Lesotho recognizes that the slow acceptance of children's rights and responsibilities of duty bearers have been an underlying factor in the decline in basic services. Another factor is the limited capacity of local government to support community-led action. Advocacy and social mobilization campaigns were events-oriented, not geared towards promoting processes of social change. The emigration of trained professionals in the social sector has weakened the capacity of the Government to implement key programmes.

Recommended programme cooperation, 2002-2007

	Estimated annual expenditure (In thousands of United States dollars)						
	2002	2003	2004	2005	2006	2007	Total
Regular resources							
Child survival, care and development	223	223	222	222	222	222	1 334
Education for All	171	170	152	142	151	142	928
Adolescent development	80	80	80	80	80	88	488
Social policy development and planning	306	357	376	386	376	378	2 179
Cross-sectoral costs	149	100	100	100	100	100	649
Subtotal	929	930	930	930	930	930	5 579
Other resources							
Child survival, care and development	755	755	755	753	755	755	4 530
Education for All	625	625	625	625	625	625	3 750
Adolescent development	495	495	485	485	485	485	2 930
Social policy development and planning	285	280	280	280	280	280	1 685
Cross-sectoral costs	105	100	100	100	100	100	605
Subtotal	2 265	2 255	2 245	2 245	2 245	2 245	13 500
Total	3 194	3 185	3 175	3 175	3 175	3 175	19 079

Country programme preparation process

13. The Ministry of Development Planning coordinated the preparation of the proposed 2002-2007 country programme. The programme objectives and strategies were developed on the basis of the outcomes of the MTR, the situation analysis of children and women, the CCA, the National Vision 20/20 planning framework and the Concluding Observations of the Committee on the Rights of the Child. Attention was also given to the Common African Position at the Organization of African Unity summit; the emerging new global agenda for children at the United Nations General Assembly Special Session on HIV/AIDS in June 2001; and the outcome document, "A world fit for children", prepared for the Special Session on Children in September 2001.

14. The programme management team, led by the Ministry of Development Planning, organized four working groups each including more than 100 representatives from relevant sectors, non-governmental organizations (NGOs), community leaders, journalists and young people. Each working group included community visits and focus group discussions in the process of identifying the key actions for UNICEF support during new programme.

Country programme goals and objectives

15. The vision of the Government of Lesotho is to become "peaceful, democratic, prosperous, secure and self-reliant nation by the year 2020". The Government recognizes that poverty reduction begins with fulfilling the rights of all children. The UNICEF country programme goal is to support the vision of the country through fostering a broad social alliance of Government, communities, organizations, private enterprise and individuals to respect, fulfil and protect the rights of all children and adolescents. The focus will be on increasing the capacity of key duty bearers to realize the rights of children to the highest attainable standard of health care and free primary education. In cooperation with other partners, UNICEF will support the achievement of national objectives related to the improved status of women, improved maternal health and gender equity.

Relation to national and international priorities

16. The country programme structure reflects the organizational priorities contained in the medium-term strategic plan for the period 2002-2005 and the regional priorities of Eastern and Southern Africa. The programmes address three stages of child development: early childhood; primary school; and adolescence. In each of these components, services are proposed for children and families affected by the HIV/AIDS. Each of these programmes will address issues related to child participation; the protection of children from abuse, neglect and exploitation; the impact of HIV/AIDS; and gender discrimination.

Programme strategy

17. In formulating the programme components, the stakeholders took into account the programme priorities of other partners in the social sector. UNICEF comparative

advantages and experiences in education and community capacity development will be cornerstones of projects aimed at promoting child-centred planning. Using the rights-based approach to programming as the overarching country programme strategy, there are three mutually reinforcing strategies to achieve specific goals: advocacy and social mobilization to promote changes in care and protection practices; universal access to quality health care, education and social services; and strengthened capacity of key duty bearers at all levels of society to meet their responsibilities towards children.

18. Child survival, care and development. This programme aims to improve access to integrated early childhood care services and has three projects.

19. The early childhood care and development (ECCD) project will support improvements in the quality of ECCD services for children in part through enabling care providers to make the services more inclusive. The outcomes will be expanded access to ECD services, reliable routine immunization, improved nutrition and timely treatment of malnourished young children. Awareness creation and counselling services will be supported for mothers and children affected by HIV/AIDS.

20. The child survival project will support the attainment of 90 per cent full immunization coverage for children under five years old; 90 per cent coverage with two doses of tetanus toxoid for pregnant women; the eradication of neonatal tetanus and poliomyelitis; and the reduction of child mortality from diarrhoea and acute respiratory infections. The project will develop the capacity of national programme managers on the Integrated Management of Childhood Illness strategy, jointly with the World Health Organization (WHO) and other partners.

21. The nutrition project aims at reducing the current malnutrition levels of stunting from 45.5 to 30 per cent, under weight from 17.8 to 12 per cent, and wasting from 5.3 to 3 per cent among children under five years old. In addition, support will be provided for the elimination of IDD and the reduction of vitamin A deficiencies by two thirds of current levels in the vulnerable groups. The project will also address complications to the treatment of malnutrition that are presented by HIV/AIDS, and provide access to information and services required to prevent mother-to-child transmission of HIV.

22. Education for All. Through its three projects, this programme aims to ensure universal access to and completion of good quality basic education; contribute to disparity reduction; and promote a child-friendly approach to teaching and learning.

23. The basic education project will address universal free basic education; quality and achievement; and the elimination of gender disparities. Strategies for achieving these goals include increasing community and civil society involvement in decision-making, and linking investment in quality education with poverty reduction programme.

24. The alternative learning opportunities project will provide access to education among the most marginalized children, including children from families affected by HIV/AIDS, children heading households, children involved in herding activities, child domestic workers and children in early marriages. Opportunities will be created to enable them to complete their primary education.

25. In partnership with the United States Peace Corps, the school health project will provide sanitation and hygiene education in selected areas of two districts. This project aims to improve learning and educational achievement by improving the poor health and nutritional status of primary school children – a key factor in early drop-out. The project will support the development of a comprehensive national health education policy.

26. **Adolescent development.** This programme will address the rights of young people in the 10-24 year age group who will constitute nearly 50 per cent of the population. The Government acknowledged in its initial report on implementation of the Convention on the Rights of the Child that it has not yet guaranteed alternative care for abandoned children, the right of young people to have their views heard, or measures to prevent child abuse and exploitation. The objective of this programme is to provide improved access to health education, life skills training and counselling services, and to facilitate youth participation in decisions affecting their lives. This programme has two project components.

27. In cooperation with the United Nations Population Fund (UNFPA), the United Nations Development Programme (UNDP) and WHO, and with support from the United Nations Foundation, the adolescent-friendly services project will establish community-based, multi-purpose youth centres in the each region of the country. Through these youth-friendly centres, young people will have access to information and life skills training, as well as technical and psychosocial support, to make informed decisions about their future. The centres will foster dialogue between young people and community leadership. One of the outcomes of these activities will be a reduction in the incidence of high-risk behaviour, including early sexual contact and the abuse of drugs, alcohol and tobacco. The project will enable adolescent mothers to complete their education through support to residential care centres.

28. The adolescent protection project will address the rights of young people at risk of abuse, neglect, exploitation and violence. The underlying causes are related to increasing household poverty and orphanhood due to the HIV/AIDS epidemic. Over 60,000 boys between the ages of 5-18 years are engaged in herding and, thus, out of school. Girls are hired as domestic servants and sex workers. In cooperation with the Save the Children Alliance, UNICEF will support counselling and psychosocial services to victims of abuse. Families and community leaders will be encouraged to prevent the abuse and exploitation of adolescents. The project will assist the Government to strengthen existing laws and undertake legislative reforms.

29. **Social policy development and planning.** Through this programme, UNICEF will assist the Government to improve the legislative and social policy environment within which its plans to improve the situation of children are being implemented. One of the key outcomes of the programme will be reliable up-to-date data on the situation of all children. The programme will have two component projects.

30. The policy development and legislation project will support the Law Reform Commission to complete the process of harmonizing national legislation and administrative practice with international law and guidelines. The outcome of these activities will be the enactment of a comprehensive child rights statute.

31. The programme planning, monitoring and evaluation and research project will aim to produce a child information database that will improve the quality of

information on the situation of children and adolescents. It will also build the capacity of stakeholders to analyse data in order to improve the impact of their projects. The activity areas will comprise strengthening existing sectoral management information systems; establishing an integrated multi-level information system; and building the capacity of the Bureau of Statistics to use data effectively.

Collaboration with partners

32. UNICEF collaborates in specific policy development and project areas with UNDP, the United Nations Educational, Scientific and Cultural Organization, UNFPA, the International Labour Organization, the World Food Programme, WHO, the World Bank, the African Development Bank (AfDB), the United Kingdom Department for International Development (DfID), Ireland Aid, German Technical Cooperation, the Governments of Japan and Norway, the World University Service of Canada, the United States Peace Corps, Save the Children, Rotary International and the International Committee of the Red Cross. UNICEF will continue to participate with the World Bank and the AfDB in supporting implementation of sector-wide development programmes in health and education.

33. In the collective response to HIV/AIDS prevention, care, support and mitigation, additional areas of collaboration are being developed with the United Nations Foundation, the United States Agency for International Development, CARE International, DfID, the United States Peace Corps, and international private sector and faith-based organizations in Lesotho and in the region and traditional community leadership.

Programme management

34. The Ministry of Development Planning oversees the UNICEF programme of cooperation. Other line ministries are responsible for implementing, monitoring and evaluating interventions in their sectors. The country programme management team (CPMT), comprised of Deputy Principal Secretaries, is chaired by the Office of Sectoral Planning within the Ministry of Development Planning. NGO partners and local authorities are also members of the CPMT.

TABLE
LINKAGE OF PROGRAMME BUDGET AND STAFFING/STAFF COSTS

COUNTRY : LESOTHO
PROGRAMME : 2002-2007

PROGRAMME SECTION/AREAS AND FUNDING SOURCE													PROGRAMME BUDGET				POSTS a/					STAFF COSTS b/											
													RR	OR	TOTAL	L2/L7	DI/L6	P/L5	P/L4	P/L3	P/L2	IP	NP	GS	TOTAL	IP	LOCAL	TOTAL					
REGULAR RESOURCES :																																	
CHILD SURVIVAL, CARE & DEVELOP.													1,134,004		1,134,004	0	0	0	0	0	0	0	1	0	1	0	131,095	131,095					
BASIC EDUCATION FOR ALL													928,004		928,004	0	0	0	0	0	0	0	1	0	1	0	131,095	131,095					
ADOLESCENT AND YOUTH DEVELOP.													488,000		488,000	0	0	0	0	0	0	0	0	0	0	0	0	0					
POLICY DEV. & PROG. PLANNING													2,179,485		2,179,485	0	0	0	0	1	2	1	2	1	5	1,690,505	294,439	1,984,944					
CROSS-SECTORAL COSTS													649,507		649,507	0	0	0	0	0	0	0	0	6	6	0	422,440	422,440					
TOTAL RR													5,579,000		5,579,000	0	0	0	1	0	1	2	3	8	13	1,690,505	979,069	2,669,574					
OTHER RESOURCES :																																	
CHILD SURVIVAL, CARE & DEVELOP.														4,530,000	4,530,000	0	0	0	0	1	0	1	1	1	3	890,928	197,696	1,088,624					
BASIC EDUCATION FOR ALL														1,750,000	1,750,000	0	0	0	0	1	0	1	0	0	1	1,023,388	0	1,023,388					
ADOLESCENT AND YOUTH DEVELOP.														2,930,000	2,930,000	0	0	0	0	0	0	0	2	0	2	0	292,332	292,332					
POLICY DEV. & PROG. PLANNING														1,685,942	1,685,942	0	0	0	0	0	0	0	0	0	0	0	0	0	0				
CROSS-SECTORAL COSTS														604,058	604,058	0	0	0	0	0	0	0	0	1	1	0	36,700	36,700					
TOTAL OR														13,500,000	13,500,000	0	0	0	0	2	0	2	3	2	7	1,916,316	526,728	2,443,044					
TOTAL RR & OR													5,579,000	13,500,000	19,079,000	0	0	0	1	2	1	4	6	10	20	3,606,821	1,505,797	5,110,618					
SUPPORT BUDGET																																	
													Operating costs				1,215,990																
													Staffing																				
GRAND TOTAL (RR + OR + SB)																	0 0 1 0 1 0 2 1 6 9				2,103,778 637,869 2,741,647												
																	0 0 1 1 3 1 6 7 16 29				5,708,599 2,143,666 7,852,265												
Number of posts and staff costs:																																	
Current programme cycle																																	
At the end of proposed programme cycle (indicative only)																																	
																	5 7 16 28																
																	6 7 16 29																
																	5,708,599 2,143,666 7,852,265																
a/ Each post, regardless of its funding source, supports the country programme as a whole.																																	
b/ Excludes temporary assistance and overtime.																																	
RR = regular resources.																																	
OR = other resources.																																	
IP = international Professional.																																	
NP = national Professional.																																	
GS = General Service.																																	
SB = support budget.																																	